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**North Carolina
Medicaid Pharmacy
Newsletter**

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In This Issue...

**Frequently Asked Q & A Regarding Prescription Limit, MTM Program, and
Recipient's Lock-In
Applying for the National Provider Identifier
Tax Identification Information
Changes in Drug Rebate Manufacturers**

Published by EDS, fiscal agent for the North Carolina Medicaid Program
1-800-688-6696 or 919-851-8888

Frequently Asked Questions and Answers Regarding the Change in Prescription Limit, MTM Program, and Recipient's Lock-In

Can any pharmacy provider call to change the recipient's lock-in pharmacy?

- No. If the recipient is currently locked into a pharmacy, then that pharmacy must be the one to call in to release the recipient to another pharmacy. The recipient's primary care physician can also request the change.

Why will pharmacies only be reimbursed for the drug cost when dispensing an emergency supply?

- Medicaid can only pay one dispensing fee per drug per month. So, if a dispensing fee will be paid, it will go to the lock-in pharmacy.

What hours will the DMA helpdesk be available?

- The number has now changed to the EDS contact number (800-688-6696 or 919-851-8888). The helpdesk hours are 8:00 AM to 4:30 PM, Monday – Friday.

Is there a contact number for the weekends?

- The helpdesk is available Monday – Friday, but an emergency fill option will be available starting June 1, 2006. If a recipient needs to be added to the lock-in file on the weekend, the pharmacy will be able to give up to a four (4) day emergency supply until the recipient can be added to the Medication Therapy Management Program. The emergency fill is indicated by using a '03' in the Level of Service field.

What percentage of the physicians is in the Community Care Network of North Carolina?

- Approximately 70% of the physicians are in the network.

Is the pharmacist required to call the physician when overriding the 9th, 10th and 11th prescription?

- No. This will be based on the pharmacist's discretion.

Will DMA be creating a form for the Medication Therapy Management program?

- Yes. DMA is planning to create a sample form by the end of June, but it will be the pharmacist's decision to determine which form they are utilizing.

Can a PA or Nurse Practitioner sign the Medication Therapy Management (MTM) form?

- Yes, if they are functioning as the primary prescriber for the recipient.

Will a letter be sent to recipients about new changes in the program?

- Yes. The recipients will be notified.

Other than being registered to service a recipient, what are the responsibilities of the Specialty Provider as in relation to the Medication Therapy Management (MTM) program?

- The Specialty providers will have no additional responsibilities in the process. It will be the responsibility of the primary pharmacy provider to monitor the recipient's medications.

Do emergency supplies have to be dispensed?

- As always, it is at the discretion of the pharmacist.

Can a pharmacy keep scanned images of completed MTM reviews on file?

- Yes, if the MTM review is readily retrievable.

Applying for the National Provider Identifier

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 requires the adoption of a standard unique identifier for healthcare providers. The final rule for the National Provider Identifier (NPI) was issued on January 23, 2004 and adopts the NPI as this national standard.

Healthcare providers can apply now for their NPI at the following website:

<https://nppes.cms.hhs.gov>. All HIPAA-covered physicians, suppliers, and other health care providers must apply for and be issued an NPI by **May 23, 2007**. In addition, all health plans must be able to accept the NPI instead of the plan specific provider identifiers on all HIPAA standard transactions by **May 23, 2007**. In other words, after this date, claims submitted to Medicaid must be billed with your NPI number instead of your current Medicaid provider number.

ALERT: When applying for an NPI, you are urged to include all Medicaid provider numbers on the NPI application form. Be sure to indicate North Carolina as your state name. It is our understanding that at some point CMS will make enumeration information available to states. At that time, this information will assist DMA in the development of crosswalks between your NPI and your Medicaid provider numbers. The Division of Medical Assistance has initiated its NPI project. Please look for future bulletins regarding procedures for gathering NPIs and taxonomies.

Outpatient Pharmacy Program Special Bulletin

Effective May 16, 2006, the Outpatient Pharmacy Program Special Bulletin was updated. This Special bulletin supersedes previously published policies and procedures. For your convenience, we had highlighted in the bulletin all new information.

The most significant change is a new telephone number of 1-800-688-6696 or 919-851-8888 to call when requesting changes to pharmacy lock-in providers or when identifying new recipients who are restricted to a single pharmacy and managed through the Medication Therapy Management Program. Specialty providers will also have to call this number to register with EDS to be added to the recipient's lock-in file.

Providers may access the May 2006 Special Bulletin, Outpatient Pharmacy Program Special Bulletin from DMA's website at <http://www/dhhs.state.nc.us/dma/bulletin.htm>. Providers should contact EDS with any billing questions.

Tax Identification Information

Providers receiving Medicaid payments of more than \$600 annually receive a 1099 MISC tax form from EDS. The 1099 MISC tax form is generated as required by IRS guidelines. It is mailed to each qualifying provider no later than January 31st of the following year. The 1099 MISC tax form will reflect the tax information on file with Medicaid as of the last Medicaid checkwrite cycle cutoff date.

The N.C. Medicaid program must have the correct tax information on file for all providers. This ensures that 1099 MISC forms are issued correctly each year and that correct tax information is provided to the IRS. Incorrect information on file with Medicaid can result in the IRS requiring Medicaid to withhold 28% of a provider's Medicaid payments. **The individual responsible for maintenance of tax information must receive the information contained in this article.**

How to Verify Tax Information

The last page of the Medicaid Remittance and Status Report (RA) indicates the tax name and number on file with Medicaid for the provider number listed. Reviewing the Medicaid RA throughout the year helps ensure the correct tax information is on file for each provider number. If you do not have access to a Medicaid RA, call EDS Provider Services at 919-851-8888 or 1-800-688-6696 to verify the tax information on file for each provider.

How to Correct Tax Information

Providers with **incorrect** information on file must complete a W-9 form, available from the IRS at <http://www.irs.gov/pub/irs-pdf/fw9.pdf>. Provider Services at the Division of Medical Assistance (DMA) must receive correct information **by the first week of December** in order to have the correct information filed for that calendar year. The procedure for submitting corrected tax information to the Medicaid program is outlined below.

All providers, including Managed Care providers, must submit completed and signed W-9 forms, along with a completed and signed Notification of Change in Provider Status form, to the address listed below:

Division of Medical Assistance
Provider Services
2501 Mail Service Center
Raleigh, NC 27699-2501

Refer to the following instructions for completing the W-9. Additional instructions can be found on the IRS' website at www.irs.gov under the link "Forms and Pubs." for forms and publications.

- List the N.C. Medicaid provider number in the block titled "List account number(s) here."
- List the N.C. Medicaid provider name in the block titled "Business Name." It should appear **exactly** as the IRS has it on file.
- Indicate the appropriate type of business.
- Fill in either a Social Security number **or** an Employee Identification number. Show the number **exactly** as the IRS has it on file for the provider's business. **Do not insert a Social Security number unless the business is a sole proprietorship or individually owned and operated.**

- An authorized person **must** sign and date this form or it will be returned as incomplete and the tax information on file with Medicaid **will not** be updated.

Change of Ownership

- All providers, including Managed Care providers, **must** report changes to DMA Provider Services using the Notification of Change in Provider Status form.
- Carolina ACCESS providers must also report changes to DMA Provider Services using the Carolina ACCESS Provider Information Change form.
- DMA Provider Services will assign a new Medicaid provider number if appropriate and will ensure the correct tax information is on file for Medicaid payments.

If DMA is not contacted and the incorrect tax identification number is used, that provider will be **liable for taxes** on income not necessarily received by the provider's business. DMA will assume no responsibility for penalties assessed by the IRS or for misrouted payments prior to written receipt of notification of ownership changes.

Notification of Change in Provider Status Form:

<http://www.dhhs.state.nc.us/dma/Forms/changeprovstatus.pdf>

Changes in Drug Rebate Manufacturers

Additions

The following labelers have entered into Drug Rebate Agreements and joined the rebate program effective on the dates indicated below:

<i>Code</i>	<i>Manufacturer</i>	<i>Date</i>
13548	Coria Laboratories, Ltd	04/01/2006
16252	Corbalt Laboratories Ltd	06/01/2006

Checkwrite Schedule

June 06, 2006	July 06, 2006	August 08, 2006
June 13, 2006	July 11, 2006	August 15, 2006
June 22, 2006	July 18, 2006	August 22, 2006
	July 27, 2006	August 30, 2006

Electronic Cut-Off Schedule

June 02, 2006	July 07, 2006	August 04, 2006
June 09, 2006	July 14, 2006	August 11, 2006
June 16, 2006	July 21, 2006	August 18, 2006
June 30, 2006		August 25, 2006

Electronic claims must be transmitted and completed by 5:00 p.m. on the cut-off date to be included in the next checkwrite. Any claims transmitted after 5:00 p.m. will be processed on the second checkwrite following the transmission date. POS claims must be transmitted and completed by 12:00 midnight on the day prior to the electronic cut-off date to be included in the next checkwrite.



Mark T. Benton, Sr
Senior Deputy Director and Chief Operating Officer
Division of Medical Assistance
Department of Health and Human Services



Cheryll Collier
Executive Director
EDS